Working as health volunteers is one strategy to develop these skills. However, little research has investigated the experiences of nursing students working as health volunteers during a disaster.

Objectives: This study aimed to investigate undergraduate nursing student perceptions and experiences of being health volunteer during the Mt. Merapi eruption.

Methods: A non-experimental, descriptive design was used. A sampling of 25 undergraduate nurse students who worked as health volunteers during the Mt. Merapi eruption completed a self-administered questionnaire. The questionnaire consisted open- and closed-ended questions, and was used to measure students' self awareness and what they have learned. Additional questions were asked to prioritize attributes required to be health volunteers. Data were aggregated and analyzed using a simple, descriptive analysis.

Results: Undergraduate nursing students had internal motivation of being health volunteers during disaster. Findings of this study illustrated benefits, future impact of being health volunteer, and required attributes of being good health volunteers.

Conclusions: Students' perceptions and experiences during disasters underscores important factors in the promotion of disaster management competency in nursing education. *Prebosp Disaster Med* 2011;26(Suppl. 1):s13-s14 doi:10.1017/S1049023X11000586

(A47) Disaster Nurses in Developing Countries: Strengthening Disaster Nurses' Competencies through Training and Disaster Drills

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Introduction: In many developing countries nurses are the front-line of care, yet do not receive appropriate theoretical or clinical skills related to disaster and emergency medicine. The ICN/WHO have outlined disaster nursing competencies for improving disaster nursing globally. These can serve as a basis for strengthening nursing through increased participation in training programs. In Mumbai, India during December 2010, MEMEX II occurred: a 7 day training in disaster preparedness and humanitarian response. This was the first time nurses were included in a separate disaster nursing track to improve skills and knowledge. Methods: Through Cornell and Columbia Universities; faculty, Indian nurses clinical competencies and disaster theory were strengthened through training in clinical trauma management, CPR, disaster preparedness and drills, public health evaluation, and the disaster cycle. 700 participants from medical, education, government and private/public entities collaborated in the training program, culminating in a large scale disaster drill and needs assessment workshop for high-level stakeholders.

Results: Nurses improved emergency clinical skills and gained theoretical disaster knowledge for the first time. Nurses located at the disaster event site gained important insight into the role of Emergency Medical Services, police, fire, and civilian defense during disaster response. Triage skills were improved and an evaluation component enabled vital information to be collected for hospital preparedness. A video was made for future training and for evaluation purposes. Nurses planned to establish coordination networks amongst the 9 hospitals present to regularly review disaster preparedness plans.

Conclusions: Strengthening nursing competencies in disaster planning and emergency response is vital to advancing nursing in developing countries and building capacity through global networking. Through a multi-disciplinary approach, professional networks can be formed, disaster plans reviewed and clinical skills improved. Nursing input is vital to hospital and community preparedness and nurses must be included in training programs and needs assessments.

Prehosp Disaster Med 2011;26(Suppl. 1):s14 doi:10.1017/S1049023X11000598

(A48) The Role of Nurse Leader and Humanitarian: Disaster Planning, Management, and Evaluation

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In the blink of an eye, a disaster caused by either natural or man-made hazard can change the sociocultural, psychological, physiological, and geopolitical integrity of all those that are directly and indirectly impacted. Disasters occur in every part of the world and are nondiscriminatory. Nurses, as the largest group of healthcare providers worldwide, are and should be at the center of disaster planning, management, and evaluation. Nurses are there when prevention is needed, during the crisis, and when the cameras and media are gone and the real work of recovery begins. Nurses remain there when the evaluation of the response, in its broadest sense, occurs and when recommendations must be made for applicable modification prior to the next disaster, as nurses are aware there will be more on the way somewhere in the world. As the second largest nursing organization in the world, the Honor Society of Nursing, Sigma Theta Tau International (STTI), has committed to being a leader in improving the health of the world's citizens. This leadership extends to being at the forefront of disaster planning, management, and evaluation. Through its member's use of knowledge, research, scholarship, service, and learning, STTI has created an environment in which they will impact the shaping of how nurses plan for, respond to, and evaluate disasters globally. This presentation will highlight the expertise that STTI has in the area of disaster planning, management, and evaluation, as well as the work that leaders are conducting to make an impact on the world during times of such crises. Discussion also will center on how STTI is continuing to provide leadership, education, service, and research opportunities in the area of disaster planning, management, and evaluation that can be applied throughout the world.

Prehosp Disaster Med 2011;26(Suppl. 1):s14 doi:10.1017/S1049023X11000604